

**DECLARATION AND POWER OF ATTORNEY**

As a below named inventor, I hereby declare that:

My residence, post office address and citizenship are as stated below next to my name.

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled

**Improved Absorption of Fat-Soluble Nutrients**

the specification of which is enclosed herewith and/or was filed on 7 April 2005 as Application No. \_\_\_\_\_.

I hereby state that I have reviewed and understand the contents of the above-identified specification, including the claims, as amended by any amendment referred to herein.

I acknowledge the duty to disclose information which is material to patentability in accordance with Title 37, Code of Federal Regulations, Section 1.56.

I hereby claim the benefit under Title 35, United States Code §119(e) of any United States provisional patent application(s) listed below and have also identified below any United States provisional patent application(s) having a filing date before that of the application on which priority is claimed:

**PROVISIONAL PRIORITY PATENT APPLICATION(S)**

60/479,507  
(Application No.)

19 June 2003  
(Filing Date)

**Priority Claimed**  
[X] Yes [ ] No

I hereby claim the benefit under Title 35, United States Code, Section 120, of any United States application(s) listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States application or in the prior U.S. Code, Section 112, I acknowledge the duty to disclose information material to patentability as defined in Title 37, Code of Federal Regulations, Section 1.56, which occurred between the

filing date of the prior application and the national or PCT international filing date of this application:

**NON-PROVISIONAL PRIORITY PATENT APPLICATION(S)**

PCT/US2004/019972	21 June 2004	Pending
(Application Serial No.)	(Filing Date)	Status

And I hereby appoint the registered attorneys and agents associated with **DUANE MORRIS LLP, Customer No. 08933**, as my attorneys or agents with full power of substitution and revocation, to prosecute this application and to transact all business in the Patent and Trademark Office connected therewith.

Address all correspondence to **Customer No. 08933, namely, DUANE MORRIS LLP**, One Liberty Place, Philadelphia, Pennsylvania 19103-7396. Please direct all communications and telephone calls to **Gary D. Colby** at 215-979-1849.

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code and that such willful false statements may jeopardize the validity of the application or any patent issuing thereon.

Full name of  
first joint inventor      Moti HAREL

Inventor's Signature      \_\_\_\_\_

Date      \_\_\_\_\_

Residence      Baltimore, MD

Citizenship      USA

Post Office Address      2012 Masters Drive, Baltimore MD 21209

Full name of second  
joint inventor

John PIECHOCKI

Inventor's Signature

Date

Residence

Odenton, MD

Citizenship

USA

Post Office Address

8710 Meadow Wood Court, Odenton MD 21113

Full name of third  
joint inventor

David J. KYLE

Inventor's Signature

Date

Residence

Catonsville, MD

Citizenship

USA

Post Office Address

1801 Narbeth Road, Catonsville, MD 21228